

POOL PERMIT APPLICATION

FAX Application to (520) 568-0138

Project Address: _____ **Book:** _____

Map: _____ **Parcel:** _____ **Subdivision:** _____ **Lot No.:** _____

Section _____ **Township** _____ **Range** _____

Description of Work: _____

Existing Use: _____ **Proposed Use:** _____

PROPERTY Owner _____ **Phone** _____

Property Owner Address: _____ **Email:** _____

CONTRACTOR Name _____ **Phone** _____

Contractor Address _____

Contractor License No.: _____ **Classification:** _____

City Business/Sales Tax License No.: _____

POOL/SPA SETBACKS: Front _____ Left _____ Right _____ Rear _____

Sq. Ft. of Surface Area Pool/Spa: _____ **Estimated Value:** _____ **Heater:** _____

UTILITIES: APS ☐ ED#3 ☐ Southwest Gas ☐

ELECTRIC: INSTALLED PER 1999 NEC

Motor/pump horse power: _____ **Full load AMPS:** _____ **Breaker:** _____ **AMPS:** _____

SUB Panel: _____ **Size:** _____ **AMP:** _____ **Feeder:** _____ **Size:** _____

MECHANICAL/PLUMBING: INSTALLED PER 2000 NPC/IMC

Heater size (BTU): _____ **Length of gas:** _____ **Size of gas piping:** _____

Applicant Name: _____ **Signature:** _____ **Date:** _____

OFFICE USE ONLY

PERMIT # _____ **PERMIT FEE** _____ **DATE RECEIVED** _____